

## **PERMIT APPLICATION REVIEW FORM**

Review Requested by:	<u>Donna Wilson</u>	Date Requested:	<u>3-13-2012</u>
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Facility Name and Permit ID	<u>Seaside Mulch Compost Facility (new, no permit number, located in New Hanover County)</u>
Applicant (Owner) Name	<u>Seaside Mulch, Inc.</u>
Description of Permit Request [This is the action the applicant is requesting in accordance with NCGS 130A-295.8(b)]	<input checked="" type="checkbox"/> (1)a. New – New Facility <input type="checkbox"/> (1)b. New – Expand Facility Boundary <input type="checkbox"/> (1)c. New – Expand Waste Boundary <input type="checkbox"/> (1)d. New – Substantial Amendment <input type="checkbox"/> (2)a. Amendment – Next Phase of the Approved Facility Plan <input type="checkbox"/> (2)b. Amendment – Five-year Renewal <input type="checkbox"/> (2)c. Amendment – Change in Ownership <input type="checkbox"/> (3)a. Modification – Change to Approved Plans ( <b>No CHR</b> ) <input type="checkbox"/> (3)b. Modification – Subsequent Permit to Operate ( <b>No CHR</b> )
Permit Fee	<u>\$ 1,750.00</u>
Date Application Received	<u>2-8-2012</u>
Contact Name, Title & Phone #	<u>Mr. Lee Craft, lee@seasidemulch.com</u>
Company	<u>Seaside Mulch, Inc.</u>
911 Address	_____
Mailing Address	<u>PO Box 380</u>
City/State/Zip	<u>Wrightsville Beach, NC 28480</u>
Parent Company	<u>N/A</u>
Known Subsidiaries	<u>N/A</u>
Other known names business has operated under	<u>N/A</u>
Known Counties of Operation	<u>New Hanover</u>
Does the applicant have a past or current solid waste permit?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown <input type="checkbox"/> Facility Type: _____ Permit #: _____
Does the applicant have other DENR permits?	Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> Division: _____ Facility Type: _____ Permit #: _____
Did the permit applicant submit Financial Assurance cost estimates?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/a <input checked="" type="checkbox"/> Not Needed <input type="checkbox"/>
Are the cost estimates sufficient?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/a <input checked="" type="checkbox"/>
Other notes	<u>Please provide a new P number for this facility. Please confirm that the compliance review requirements for this application have been satisfied.</u>